

**SUMMONS FOR DEFENDANT**  
 **SUMMONS FOR WITNESS**

DOCKET NUMBER  
[REDACTED]

**Trial Court of Massachusetts  
District Court Department**

SESSION: [SEVERITY CODE]

NAME, ADDRESS AND ZIP CODE OF DEFENDANT

Commonwealth vs. [REDACTED]

NAME, ADDRESS AND ZIP CODE OF WITNESS

KATE CORBETT c/o WILLIAM A. HINTON STATE LAB  
305 south  
boston, MA 02130

NAME AND ADDRESS OF COURT DIVISION

Taunton Trial Court  
40 Broadway  
Taunton, MA 02780

YOU MUST  
APPEAR AT  
THIS COURT  
ADDRESS ON  
THE DATE  
AND TIME  
SPECIFIED  
HEREIN

DATE AND TIME OF APPEARANCE

Jury Trial  
April 4, 2012 at 08:30 AM

DATE

TIME

OFFENSE(S)

AMMUNITION WITHOUT FID CARD, POSSESS c269 §10(h)(1),  
CONSPIRACY TO VIOLATE DRUG LAW c94C §40, DRUG,  
POSSESS TO DISTRIB CLASS A c94C §32(a) and FIREARM  
WITHOUT FID CARD, POSSESS c269 §10(h)

**TO ANY PERSON AUTHORIZED TO SERVE CRIMINAL PROCESS IN THE COMMONWEALTH:**

You are hereby commanded to forthwith serve the annexed summons upon the defendant or witness named within by delivering it to the defendant or witness personally, or by leaving it at the dwelling house or usual place of abode of the defendant or witness with some person of suitable age and discretion then residing therein, or by mailing it to the last known address of the defendant or witness.

NOTE: A summons for a witness may also be served by any person authorized to serve a summons in a civil action. See Rule 17(d)(1) of the Massachusetts Rules of Criminal Procedure.

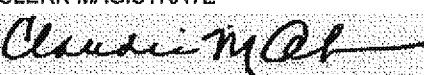
To the above named  Defendant  Witness:

You are hereby ordered to appear in this Court on the appearance date noted above.

To answer to a criminal complaint charging you with the offense(s) listed above.

To give evidence and testify on behalf of the  Commonwealth  Defendant  
in the matter described above, and to appear from time to time and day to day  
thereafter as ordered. You are further required to bring with you:

[REDACTED]

WITNESS:	FIRST JUSTICE	DATE OF ISSUE	CLERK-MAGISTRATE
	Hon. Kevin J. Cunningham	February 3, 2012	

**RETURN OF SERVICE**

I hereby certify that I served the within summons upon the above named  Defendant  Witness by

Delivering a copy of it personally to the defendant or witness.

Leaving a copy of it at the dwelling house or usual place of abode of the defendant or witness with a person of suitable age and discretion residing therein.

Mailing a copy of it to the last known address of the defendant or witness.

I received the summons on \_\_\_\_\_ but I was unable to make service because: \_\_\_\_\_

DATE RECEIVED

DATE OF SERVICE	SIGNATURE OF PERSON MAKING SERVICE	TITLE OF PERSON MAKING SERVICE
DC-CR-7 (1/84)		

**SUMMONS FOR DEFENDANT**  
 **SUMMONS FOR WITNESS**

DOCKET NUMBER  
[REDACTED]

**Trial Court of Massachusetts  
District Court Department**

SESSION: [SEVERITY CODE]

NAME, ADDRESS AND ZIP CODE OF DEFENDANT

**Commonwealth vs. Jason Dagraca-Teixeira**

NAME, ADDRESS AND ZIP CODE OF WITNESS

KATE CORBETT C/O WILLIAM A. STINTON STATE LAB  
305 south st  
boston, MA 02130

NAME AND ADDRESS OF COURT DIVISION

Taunton Trial Court  
40 Broadway  
Taunton, MA 02780

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POSSESS TO DISTRIB CLASS A c94C §32(a) and FIREARM  
WITHOUT FID CARD, POSSESS c269 §10(h)

To the above named  Defendant  Witness:

You are hereby ordered to appear in this Court on the appearance date noted above.

To answer to a criminal complaint charging you with the offense(s) listed above.

To give evidence and testify on behalf of the  Commonwealth  Defendant  
in the matter described above, and to appear from time to time and day to day  
thereafter as ordered. You are further required to bring with you:

WITNESS:	FIRST JUSTICE	DATE OF ISSUE	CLERK-MAGISTRATE
	Hon. Kevan J. Cunningham	February 3, 2012	[REDACTED]

**WARNING TO DEFENDANT OR WITNESS**

Failure to appear in accordance with this summons may result in the issuance of  
a warrant for your arrest. Please bring this document with you to court.

**ATENCION:**

Esta es una notificación oficial de la corte.  
Si usted no sabe leer inglés, obtenga traducción !

DATE OF SERVICE	SIGNATURE OF PERSON MAKING SERVICE	TITLE OF PERSON MAKING SERVICE